

ISSUE SLIP STAPLE AREA (for additional class references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------|----------|--------|----------|
| FEE DETERMINATION | UT | 69007 | 19/3/99 |
| O.I.P.E. CLASSIFIER | | | |
| FORMALITY REVIEW | RF | 70556 | 10-22-99 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) Canceled A Appeal
 + Restricted O Objected

| Claim | Final | Original | Date |
|-------|-------|----------|------|
| 1 | 5 | 7 | |
| 2 | 5 | 13 | |
| 3 | 5 | 13 | |
| 4 | 5 | 13 | |
| 5 | 5 | 13 | |
| 6 | 5 | 13 | |
| 7 | 5 | 13 | |
| 8 | 5 | 13 | |
| 9 | 5 | 13 | |
| 10 | 5 | 13 | |
| 11 | 5 | 13 | |
| 12 | 5 | 13 | |
| 13 | 5 | 13 | |
| 14 | 5 | 13 | |
| 15 | 5 | 13 | |
| 16 | 5 | 13 | |
| 17 | 5 | 13 | |
| 18 | 5 | 13 | |
| 19 | 5 | 13 | |
| 20 | 5 | 13 | |
| 21 | 5 | 13 | |
| 22 | 5 | 13 | |
| 23 | 5 | 13 | |
| 24 | 5 | 13 | |
| 25 | 5 | 13 | |
| 26 | 5 | 13 | |
| 27 | 5 | 13 | |
| 28 | 5 | 13 | |
| 29 | 5 | 13 | |
| 30 | 5 | 13 | |
| 31 | 5 | 13 | |
| 32 | 5 | 13 | |
| 33 | 5 | 13 | |
| 34 | 5 | 13 | |
| 35 | 5 | 13 | |
| 36 | 5 | 13 | |
| 37 | 5 | 13 | |
| 38 | 5 | 13 | |
| 39 | 5 | 13 | |
| 40 | 5 | 13 | |
| 41 | 5 | 13 | |
| 42 | 5 | 13 | |
| 43 | 5 | 13 | |
| 44 | 5 | 13 | |
| 45 | 5 | 13 | |
| 46 | 5 | 13 | |
| 47 | 5 | 13 | |
| 48 | 5 | 13 | |
| 49 | 5 | 13 | |
| 50 | 5 | 13 | |

| Claim | Final | Original | Date |
|-------|-------|----------|------|
| 51 | | | |
| 52 | | | |
| 53 | | | |
| 54 | | | |
| 55 | | | |
| 56 | | | |
| 57 | | | |
| 58 | | | |
| 59 | | | |
| 60 | | | |
| 61 | | | |
| 62 | | | |
| 63 | | | |
| 64 | | | |
| 65 | | | |
| 66 | | | |
| 67 | | | |
| 68 | | | |
| 69 | | | |
| 70 | | | |
| 71 | | | |
| 72 | | | |
| 73 | | | |
| 74 | | | |
| 75 | | | |
| 76 | | | |
| 77 | | | |
| 78 | | | |
| 79 | | | |
| 80 | | | |
| 81 | | | |
| 82 | | | |
| 83 | | | |
| 84 | | | |
| 85 | | | |
| 86 | | | |
| 87 | | | |
| 88 | | | |
| 89 | | | |
| 90 | | | |
| 91 | | | |
| 92 | | | |
| 93 | | | |
| 94 | | | |
| 95 | | | |
| 96 | | | |
| 97 | | | |
| 98 | | | |
| 99 | | | |
| 100 | | | |

| Claim | Final | Original | Date |
|-------|-------|----------|------|
| 110 | | | |
| 112 | | | |
| 113 | | | |
| 114 | | | |
| 115 | | | |
| 116 | | | |
| 117 | | | |
| 118 | | | |
| 119 | | | |
| 120 | | | |
| 121 | | | |
| 122 | | | |
| 123 | | | |
| 124 | | | |
| 125 | | | |
| 126 | | | |
| 127 | | | |
| 128 | | | |
| 129 | | | |
| 130 | | | |
| 131 | | | |
| 132 | | | |
| 133 | | | |
| 134 | | | |
| 135 | | | |
| 136 | | | |
| 137 | | | |
| 138 | | | |
| 139 | | | |
| 140 | | | |
| 141 | | | |
| 142 | | | |
| 143 | | | |
| 144 | | | |
| 145 | | | |
| 146 | | | |
| 147 | | | |
| 148 | | | |
| 149 | | | |
| 150 | | | |

If more than 150 claims or 10 actions
 staple additional sheet here

(LEFT INSIDE)